

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
I.P.E. CLASSIFIER		21	12/23/93
FORMALITY REVIEW	LA	63370	1/27/94

INDEX OF CLAIMS

✓ ..... Rejected  
 — ..... Allowed  
 — (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-acted  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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